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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| | | |
|--|-------------------------------|------------------------|
| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e))) | Attorney Docket Number | B0052-US01 |
| | First Named Inventor | HÖGBERG, Niclas et al. |
| | COMPLETE IF KNOWN | |
| | Application Number | / To be assigned |
| | Filing Date | Herewith |
| | Group Art Unit | To be assigned |
| | Examiner Name | To be assigned |

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method and Apparatus for Processing Blood and Blood Components

the specification of which

(Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

11/30/2001

as United States Application Number or PCT International

Application Number **To be assigned** and was amended on (MM/DD/YYYY) **11/30/2001** (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above:

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application | | Foreign Filing Date | Priority | Certified Copy Attached? |
|---------------------------|---------------------|---------------------|-------------------------------------|--|
| | | | | YES NO |
| PCT/SE00/01077 | Int'l PCT Appl. | 26 May 2000 | <input checked="" type="checkbox"/> | <input type="checkbox"/> <input checked="" type="checkbox"/> |
| 9903841-6 | Swedish Patent Appl | 26 October 1999 | <input checked="" type="checkbox"/> | <input type="checkbox"/> <input checked="" type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | |
|-----------------------|--------------------------|--|
| | | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:

☒ Customer Number
or Bar Code LabelOR ☐

Correspondence address below

Name Gambro, Inc.

24994

PATENT, TRADEMARK OFFICE

Address 10810 W. Collins Ave.

Address

City Lakewood

State CO

ZIP 80215-4439

Country USA

Telephone 303-205-2560

Fax 303-231-4198

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Niclas

Family Name
or Surname

HÖGBERG

Inventor's
Signature

Date

Residence: City Karlskoga

State

Country Sweden

Citizenship Sweden

Mailing Address Kyrkotorp 18 B

Mailing Address

City Karlskoga

State

ZIP S-691 32

Country Sweden

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Emanuel

Family Name
or Surname

HÄLLGREN

Inventor's
Signature

Date

Residence: City Karlskoga

State

Country Sweden

Citizenship Sweden

Mailing Address Murarvägen 2

Mailing Address

City Karlskoga

State

ZIP S-691 43

Country Sweden

☒ Additional inventors are being named on 1 supplemental Additional Inventor(s) sheet(s). PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

| | | | | |
|--|--------------|---|----------------|--------------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | |
| Given Name (first and middle [if any]) | | Family Name or Surname | | |
| Peter | | PIHLSTEDT | | |
| Inventor's Signature | | | | Date |
| Residence: City | Stockholm | State | Country Sweden | Citizenship Sweden |
| Mailing Address | Frejgatan 10 | | | |
| Mailing Address | | | | |
| City | Stockholm | State | ZIP S-113 49 | Country Sweden |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | |
| Given Name (first and middle [if any]) | | Family Name or Surname | | |
| | | | | |
| Inventor's Signature | | | | Date |
| Residence: City | | State | Country | Citizenship |
| Mailing Address | | | | |
| Mailing Address | | | | |
| City | | State | ZIP | Country |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | |
| Given Name (first and middle [if any]) | | Family Name or Surname | | |
| | | | | |
| Inventor's Signature | | | | Date |
| Residence: City | | State | Country | Citizenship |
| Mailing Address | | | | |
| Mailing Address | | | | |
| City | | State | ZIP | Country |

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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

| | |
|------------------------|------------------------|
| Application Number | To be assigned |
| Filing Date | Herewith |
| First Named Inventor | HÖGBERG, Niclas et al. |
| Group Art Unit | To be assigned |
| Examiner Name | To be assigned |
| Attorney Docket Number | B0052-US01 |

I hereby appoint:

☒ Practitioners at Customer Number →

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
| | |
| | |
| | |
| | |



as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Firm or Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Edna M. O'Connor, Assistant Secretary, Gambro, Inc.

Signature

Date

November 30 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

☒ *Total of 1 forms are submitted.

Case 3809

P.ans. nr. 9903841-6

Härmed förklarar vi, Niclas Högberg

med postadress Kyrkotorp 18 B, 691 32 KARLSKOGA

och Emanuel Hällgren

med postadress Murarvägen 2, 691 43 KARLSKOGA

och Peter Pihlstedt

med postadress Frejgatan 10, 113 49 STOCKHOLM

att vi överlåtit till Sanguistech AB, äganderätten till den av oss gjorda

uppfinningen "Sätt och anordning för behandling av blod och blod-

komponenter" ävensom hela vår rätt att i Konungariket Sverige och i

övriga länder söka och innehava patent på uppfinningen samt att göra

bruk av eventuella prioritetsrättigheter.

Karlskoga den 29 oktober 1999...

Niclas Högberg

Emanuel Hällgren

Peter Pihlstedt

Egenhändiga namnteckningarna bevittnas:

[Signature]

[Signature]

100-443887-100

Stockholm 9 July, 2001

For and on behalf of Sanguistech AB

By Joan Wilder CHAIRMAN By Andy Smith Director

STATEMENT UNDER 37 CFR 3.73(b)

Applicant: Gambro, Inc.

Application No.: To be assigned Filed: Herewith

Entitled: Method and Apparatus for Processing Blood and Blood Components

Gambro, Inc., a Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of an undivided part interest

in the patent application identified above by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application identified above. The assignment was recorded in the Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. ☒ A chain of title from the inventor(s), of the patent application identified above, to the current assignee as shown below:

1. From: Inventors To: Sanguistech AB
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: Sanguistech AB To: Gambro, Inc.
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☒ Copies of assignments or other documents in the chain of title are attached.

The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of the assignee.

November 30, 2001
Date

Edna M. O'Connor
Signature

Edna M. O'Connor

Typed or printed name

Assistant Secretary, Gambro, Inc.

Title